

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

1383574
OMB APPROVAL
OMD M 0005 00701

OMB Number 3235-0076

Expires:

Estimated average burden

hou

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	· -
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Excel Energy Technologies, Ltd.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
8282 South Memorial Drive, Suite 303, Tulsa, Oklahoma 74133	(918) 585-5000
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	\$
Type of Business Organization corporation limited partnership, already formed other () business trust limited partnership, to be formed	PROCESSEE DEC. 1.8.2006
Month Year	DEC. 1 0.2000
Actual or Estimated Date of Incorporation or Organization: 10 04 Actual Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	THOMSON FINANCIAL

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		A. BASIC IDI	ENTIFICATION DATA							
2. Enter the information re-	quested for the foll	lowing:								
• Each promoter of the issuer, if the issuer has been organized within the past five years;										
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer										
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and										
 Each general and m 	nanaging partner of	f partnership issuers.								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	✓ Director	General and/or					
	<u>.</u>		2		Managing Partner					
Full Name (Last name first, if Karp, Bradley C.	individual)									
Business or Residence Address	a Olymbar and	Street City State 7in Co	oda)							
8282 South Memorial Dri										
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first, it	f individual)									
Humphrey, David L.										
Business or Residence Addres	,	•	ode)							
415 South Boston Avenu										
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first, in Edwards, Gregory J.	f individual)				-					
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)							
12005 North Virginia Aver	nue, Oklahoma (City, OK 73120								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first, i	f individual)									
Hayes, David W.										
Business or Residence Addre	•	Street, City, State, Zip Co D, Irving, TX 75062	ode)	·						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first, i Hersh, Kenneth A.	f individual)			· - =						
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)							
125 East John Carpenter	Fwy., Suite 600), Irving, TX 75062								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first, i Oklahoma Equity Partne		· · · · · ·								
Business or Residence Addre 415 South Boston Avenu			ode)							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner					
Full Name (Last name first, i	f individual)									
Renaissance Interests, L										
Business or Residence Addre 4213 Waters Edge Cove,	ss (Number and	Street, City, State, Zip C	ode)							
	(Use blan	nk sheet, or copy and use	additional copies of this s	heet, as necessary	·)					

A. BASIC IDENTIFICATION DATA										
2. Enter the information requested for the following:										
• Each promoter of the issuer, if the issuer has been organized within the past five years;										
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer										
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and										
Each general and managing partner of partnership issuers.										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner										
Full Name (Last name first, if individual) Excel Energy Technologies Holdings, LLC										
Business or Residence Address (Number and Street, City, State, Zip Code)										
8282 South Memorial Drive, Suite 303, Tulsa, OK 74133										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner										
Full Name (Last name first, if individual) Mesa Oklahoma Growth Fund I, L.P.										
Business or Residence Address (Number and Street, City, State, Zip Code)										
12005 North Virginia Avenue, Oklahoma City, OK 73120										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or										
Managing Partner										
Full Name (Last name first, if individual) Agee, Mark A.										
Business or Residence Address (Number and Street, City, State, Zip Code)										
8282 South Memorial Drive, Suite 303, Tulsa, OK 74133										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner										
Full Name (Last name first, if individual)										
Hildebrand, Paul										
Business or Residence Address (Number and Street, City, State, Zip Code) 8282 South Memorial Drive, Suite 303, Tulsa, OK 74133										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or										
Managing Partner										
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner										
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner										
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)										
tone plank shoot, or copy and use additional copies of this sheet, as hecessary)										

	B. INFORMATION ABOUT OFFERING												
1	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?											Yes	No ⊠
••	mas the	155401 5510	, 01 4005 1			Appendix,					•••••	Li	
2.	2. What is the minimum investment that will be accepted from any individual?										\$		
3	3. Does the offering permit joint ownership of a single unit?											Yes	No 🔀
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any										irectly, any	ت .	<u>-</u>
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state													
	or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such												
a broker or dealer, you may set forth the information for that broker or dealer only. N/A Full Name (Last name first, if individual)													
Buc	inece or	Residence	Address (N	umber and	I Street Ci	ty State 7	in Code)						
- Dus			Addiess (N	umber and	i street, Ci	ity, State, 7.	ip Code)						
Nar	ne of Ass	sociated Br	oker or Dea	aler									
Sta			Listed Has				· -						
	(Check	"All States	" or check	individual	States)			••••••			•••••	☐ AI	l States
	AL	AK	AZ	AR	CA	co	CT	DE	DC	FL	GA.	HI	[ID]
	MT)	<u>IN</u> NE	IA NV	KS NH	$\overline{\overline{\text{NJ}}}$	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	ΫA	WA	WV	WI	WY	PR
Ful	l Name (l	Last name	first, if indi	ividual)									
Bus	siness or	Residence	Address (N	Number an	d Street, C	ity, State, 2	Zip Code)						
Nar	ne of Ass	sociated Br	oker or Dea	aler									
<u> </u>		inh Danson	Listed Has	Saliaitad	on Intende	ta Caliait I	Durchasars			·			
эга			or check							***************************************		□ VI	l States
	ĀL	AK	ΑZ	[ĀR]	ĈA	CO	CT	DE	DC	(FL)	ĞA	HI	[ID]
	IL.	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
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Ful	i Name (i	Last name	first, if indi	(Vidual)									
Bu	siness or	Residence	Address (N	Number an	d Street, C	ity, State, 2	Zip Code)						
Nai	me of Ass	sociated Br	oker or Dea	aler									
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers	-					
	(Check	"All States	" or check	individual	States)	•••••		•••••		•••••	·······	∏ Al	1 States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL MT	NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	ŪΤ	VT	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	;	
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	s 0.00	s 0.00
	Equity	\$ 2,250,000.00	\$ 2,250,000.00
	Common P Preferred		*
	Convertible Securities (including warrants)	s 0.00	s 0.00
	Partnership Interests		\$ 0.00
	Other (Specify 0)		\$ 0.00
	Total		\$ 2,250,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.	<u> </u>	\$
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	!	Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	3	\$_2,250,000.00
	Non-accredited Investors	0	\$_0.00
	Total (for filings under Rule 504 only)	N/A	\$_N/A
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security N/A	Sold
	Rule 505		\$ N/A
	Regulation A		\$_N/A
	Rule 504		\$_N/A
	Total	N/A	\$_N/A
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$_0.00
	Printing and Engraving Costs		§ 0.00
	Legal Fees		\$ 25,000.00
	Accounting Fees		\$_0.00
	Engineering Fees		\$_0.00
	Sales Commissions (specify finders' fees separately)		\$ 0.00
	Other Expenses (identify)	<u>-</u>	\$ <u>0.00</u>
	Total	7 1	\$ 25,000.00

		THE ROLL INVESTORS, EXPENSES AND USE OF	ROCEKDS	
	and total expenses furnished in response to Part C	Tering price given in response to Part C — Question 1 — Question 4.a. This difference is the "adjusted gross		\$ 2,225,000.00
5 .	each of the purposes shown. If the amount for	proceed to the issuer used or proposed to be used for any purpose is not known, furnish an estimate and l of the payments listed must equal the adjusted gross art C — Question 4.b above.		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		\$ <u>0.00</u>	\$ 0.00
	Purchase of real estate		\$ 0.00	\$ 0.00
	Purchase, rental or leasing and installation of n	nachinery	\$ <u>0.00</u>	\$ 0.00
	Construction or leasing of plant buildings and t	facilities	\$_0.00	. [\$_0.00
	Acquisition of other businesses (including the voifering that may be used in exchange for the a issuer pursuant to a merger)		\$ 0.00	. []\$_0.00
	Repayment of indebtedness	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$_0.00	\$ 253,000.00
	Working capital		<u>\$_0.00</u>	\$1,972,000.00
	Other (specify):		\$ <u></u>	\$ 0.00
			\$ <u>0.00</u>	\$ 0.00
	Column Totals		\$_0.00	\$ 2,225,000.00
	Total Payments Listed (column totals added)		 \$ 2.	225,000.00
· ·		OF DEPENDING NATURE	Š., W. 2000.	
sigi	nature constitutes an undertaking by the issuer to	the undersigned duly authorized person. If this notice furnish to the U.S. Securities and Exchange Commis coredited investor pursuant to paragraph (b)(2) of I	sion, upon writte	
Ĭssı	uer (Print or Type)	Signature	Date	
Ex	cel Energy Technologies, Ltd.	Rendley C. Kerro	29 - NOV-	2006
Naı	me of Signer (Print or Type)	Title of Signer (Print or Type)		
Bra	edley C. Karp	President and Chief Executive Officer		
_	11-11-11-11-11-11-11-11-11-11-11-11-11-			

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

74-7			
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No ⊠

See Appendix, Column 5, for state response.

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Excel Energy Technologies, Ltd.	Rudley C. Karp Title (Print or Type)	29-NOV-2006
Name (Print or Type)	Title (Print or Type)	
Bradley C. Karp	President and Chief Executive Officer	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 2 3 4 1 Disqualification Type of security under State ULOE (if yes, attach and aggregate Intend to sell explanation of offering price Type of investor and to non-accredited amount purchased in State offered in state waiver granted) investors in State (Part E-Item 1) (Part C-Item 1) (Part C-Item 2) (Part B-Item 1) Number of Number of Accredited Non-Accredited No State Yes No Investors Amount **Investors** Amount Yes ΑL ΑK ΑZ AR CA CO CT DE DÇ FL GA НІ ID ΙL IN IA KS ΚY LA ME MDMA ΜI MN MS

APPENDIX 5 2 3 4 1 Disqualification Type of security under State ULOE (if yes, attach Intend to sell and aggregate Type of investor and explanation of to non-accredited offering price amount purchased in State waiver granted) offered in state investors in State (Part C-Item 2) (Part E-Item 1) (Part C-Item 1) (Part B-Item 1) Number of Number of Non-Accredited Accredited No Investors Amount **Investors** Amount Yes No State Yes MO MT NE NV NH NJ NM NY NC ND OH Series A Preferred Stock, \$1,500,000 2 \$1,500,000.00 OK OR PA RΙ SC SD TN Series A Preferred Stock, \$750,000 TX \$750,000.00 UT VT VA WA W۷ WI

	APPENDIX										
l		2	3		4 5 Disqualifi			5 alification			
	to non-a	to sell accredited as in State s-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				ate ULOE attach ation of granted) -Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
WY											
PR			•								